Case 24-23962 Doc 28 Filed 12/04/24 Entered 12/04/24 17:38:23 Desc Main Document Page 1 of 4

Debtor 1 Israel Cruz Debtor 2 Israel Cruz Debtor 2 Israel Cruz Debtor 2 Israel Cruz Debtor 3 Israel Cruz Debtor 4 Israel Cruz Debtor 5 Israel Cruz Debtor 6 Israel Cruz Debtor 7 Israel Cruz Debtor 8 Israel Cruz Debtor 9 Israel Cruz Debtor 1 Israel Cruz Debtor 1 Israel Cruz Debtor 2 Israel Cruz Debtor 3 Israel Cruz Debtor 1 Israel Cruz Debtor 3 Israel Cruz Debtor 4 Israel Cruz Debtor 5 Israel Cruz Debtor 6 Israel Cruz Debtor 7 Israel Cruz Debtor 8 Israel Cruz Debtor 9 Israel Cru	Fill	in this information to identify your ca	ase:							
United States Bankruptcy Court for the: DISTRICT OF UTAH Case number 24-23962 (If thrown) Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheat to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic living with you, include information about your spouse. If more space is needed, attach a separate sheat to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic living with you, provided information about your spouse. If more space is needed, attach a separate page with information about additional employers. Include part-line, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 or non-filling spouse Employer's name Autoliv Employer's address Describe Employed work. Employer's address Occupation May include student or homemaker, if it applies. Describe Employer's address Employer's address Describe Employer's address Employer's address Describe Employed work. Employer's name Autoliv Employer's name Autolivi Emplo	Deb	otor 1 Isreal Cruz								
Case number 24-23962 Check if this is: A aupplement showing postpetition chapter 13 income as of the following date: A supplement showing postpetition chapter 13 income as of the following date: MM / DD/YYYY										
Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is not editing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about your spouse. If more space is needed work. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Describe Employer's address Employer's name Autoliv Employer's address 250 American Way Brigham City, UT 84302 How long employers have more than one employer, combine the information for all employers for that person on the lines below. If you need non-filing spouse in the space include your non-filing spouse in the space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll and continuing spouse). In the paid monthly, calculate what the monthly wage would be. List monthly gross wages, salary, and commissions (before all payroll and continuing spouse). N/A Settimate and list monthly overtime pay.	Uni	ted States Bankruptcy Court for the	: DISTRICT OF UTAH							
Schedule I: Your Income Be as complete and accurate as possible. If two married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, stack a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic Part I: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information about additional employed. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Describe Employer's name Employer's address Employer's add							nt showing postpetition	chapter		
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate dand your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic page is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questic page is needed, attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Occupation Production Associate/Forklift Employer's address Employer's name Employer's address Employer's address Employer's name Employer's address Employer's address Employer's address Employer's address Employer's name Employer's address Employer's name Emplo										
1. Fill in your employment information. F you have more than one job, attach a separate page with information about additional employers. Cocupation Production Associate/Forklift	Be a supp spou attac	s complete and accurate as poss olying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your th you, do not inclu	spouse is liv	ring with you, incluing about your spo	ude information about ouse. If more space is	ible for your needed,		
If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Different than one employed there? Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name 250 American Way Brigham City, UT 84302 How long employed there? Include part-time, seasonal, or self-employed work. Employer's name 250 American Way Brigham City, UT 84302 How long employed there? Include your non-filing spouse as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spounless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need nore space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		. ,								
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Cocupation may include student or homemaker, if it applies. Employer's address 250 American Way Brigham City, UT 84302 How long employed there? 4 months Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouluriess you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you neemore space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A N/A		information.		Debtor 1		Debtor 2	Debtor 2 or non-filing spouse			
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's a		attach a separate page with information about additional								
Coccupation may include student or homemaker, if it applies. Employer's address 250 American Way Brigham City, UT 84302 How long employed there? 4 months Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spot unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you neem more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		Include part-time, seasonal, or	Occupation		<mark>ciate/Forklift</mark>					
Brigham City, UT 84302 How long employed there? 4 months Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spot unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		Occupation may include student			<i>'</i> ay					
Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spot unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A										
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spoul unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			How long employed th	ere? 4 month	าร					
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need none space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Par	Give Details About Mor	nthly Income							
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. For Debtor 1 For Debtor 2 or non-filling spouse 2. \$ 4,600.00 \$ N/A 3. +\$ 0.00 +\$ N/A			te you file this form. If yo	ou have nothing to rep	port for any lin	e, write \$0 in the sp	ace. Include your non-fil	ling spous		
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 4,600.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				ombine the informatio	n for all emplo	oyers for that perso	n on the lines below. If y	you need		
 deductions). If not paid monthly, calculate what the monthly wage would be. \$ 4,600.00 \$ N/A Estimate and list monthly overtime pay. \$ 0.00 +\$ N/A 						For Debtor 1				
	2.				2. \$	4,600.00	\$N/A_			
4. Calculate gross Income. Add line 2 + line 3. 4. \$ 4,600.00 \$ N/A	3.	Estimate and list monthly overt	ime pay.		3. +\$	0.00	+\$ <u>N/A</u>			
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4. \$	4,600.00	\$ <u>N/A</u>			

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Isreal Cruz	_	Case	e number (if known)	24-239	3 62		
				Fo	r Debtor 1		ebtor 2 iling sp	ouse	
	Cop	by line 4 here	4.	\$_	4,600.00	\$		N/A	
5.	List	t all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	544.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	207.57	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$		N/A	
	5e.	Insurance	5e.	\$_	126.79	\$		N/A	
	5f.	Domestic support obligations	5f.	\$_	428.83	\$		N/A	
	5g.	Union dues	5g.	\$_	0.00	\$		N/A	
	5h.	Other deductions. Specify: Fitness	_ 5h.+	\$_	10.83	+ \$		N/A	
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,318.02	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,281.98	\$		N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00			N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$		N/A	
	8e.	Social Security	8e.	\$_	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	-	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		N/A	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,281.98 + \$_		N/A =	\$	3,281.98
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depen		•	-	hedule . 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies			•		12.	\$	3,281.98
13	Do	you expect an increase or decrease within the year after you file this form	2					Combin	ed / income
10.		No. Yes Explain:	•						

Official Form 106l Schedule I: Your Income page 2

Eill in	this information to identify your ages:				
	this information to identify your case:				
Debto	r 1 Isreal Cruz		_	ck if this is:	
Debto	r 2			An amended filing A supplement show	ving postpetition chapter 13
(Spou	se, if filing)			expenses as of the	
United	States Bankruptcy Court for the: DISTRICT OF UTAH			MM / DD / YYYY	
Case	number 24-23962				
(If kno	wn)				
Off	icial Form 106J				
	hedule J: Your Expenses				12/15
Be as	s complete and accurate as possible. If two married people are mation. If more space is needed, attach another sheet to this fo own). Answer every question.				or supplying correct
Part 1					
	Is this a joint case?				
	No ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of Deb	otor 2.	
2. I	Do you have dependents?	·			
I	Do not list Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
(dependents names.	Son		6	⊠ Yes □ No
		Daughter		8	☐ NO ☑ Yes
					☐ No ☐ Yes
					☐ Yes ☐ No
					Yes
(Do your expenses include ⊠ No expenses of people other than □ Yes yourself and your dependents?				
exper application Included value	Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unless your say of a date after the bankruptcy is filed. If this is a supplicable date. de expenses paid for with non-cash government assistance if sof such assistance and have included it on Schedule I: Your cial Form 106I.)	lemental <i>Schedule</i> .			of the form and fill in the
`	,				
	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	S	1,825.00
ı	If not included in line 4:				
4	4a. Real estate taxes		4a. \$	s	0.00
4	4b. Property, homeowner's, or renter's insurance			5	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	<u> </u>	100.00
	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor	me equity loans	4d. \$		0.00
J. 1	-additional mortgage payments for your residence, such as nor	ne equity loans	5. \$		0.00
	Utilities:		_		005.00
	6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection		6a. \$ 6b. \$		325.00 0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	3	6c. \$		100.00
	6d Other Specify		64 6		0.00

Case 24-23962 Doc 28 Filed 12/04/24 Entered 12/04/24 17:38:23 Desc Main Document Page 4 of 4

Debtor 1 Isreal Cruz	Case number (if known)	24-23962
7. Food and housekeeping supplies	7. \$	316.00
8. Childcare and children's education costs	0 0	0.00
9. Clothing, laundry, and dry cleaning	0 6	10.00
10. Personal care products and services	10. \$	20.00
11. Medical and dental expenses	11. \$	50.00
12. Transportation. Include gas, maintenance, bus or train fare.	Π. ψ	00.00
Do not include car payments.	12. \$	150.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books		50.00
14. Charitable contributions and religious donations		0.00
15. Insurance.		3.33
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	4=1 🚓	0.00
15c. Vehicle insurance		0.00
15d. Other insurance. Specify:	454 A	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	4- 4	0.00
17d. Other. Specify:	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report	as	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106)	l). 18. \$	0.00
19. Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Sc		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify:	21. <u>+\$</u>	0.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	2,946.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	· ·	2,010.00
22c. Add line 22a and 22b. The result is your monthly expenses.		2.046.00
220. Add line 22a and 22b. The result is your monthly expenses.	ф <u>———</u>	2,946.00
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,281.98
23b. Copy your monthly expenses from line 22c above.	23b\$	2,946.00
		·
23c. Subtract your monthly expenses from your monthly income.		
The result is your monthly net income.	23c. \$	335.98
24. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? ☑ No. ☐ Yes. Explain here:		ease or decrease because of a
ш тоз		